

NOV 28 2006

PTO/SB/97 (09-06)

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VIA FACSIMILE NO. 571 273 8300

NOTICE OF APPEAL from the Examiner to the Board of Patent Appeals and Interferences

RE: Patent Application No. 10/728,358 filed December 3, 2003 (Attorney Docket: LP4820USNA)

Papers submitted are:

Notice of Appeal (PTO/SB/31) (1 page)

Fee Transmittal (PTO/SB/17) (original and copy)

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NO. 292 P. 2

PTO/SB/31 (08-06)

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) LP4820USNA						
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ Signature _____ Typed or printed name <u>Sharon Tomlinson</u>	In re Application of <p style="text-align: center;">Tianyi Liao</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">Application Number 10/728,358</td> <td style="width: 50%; padding: 2px;">Filed 12/03/2003</td> </tr> <tr> <td colspan="2" style="padding: 2px;">For Size-Covered Composite Yarns and Method for Making Same</td> </tr> <tr> <td style="padding: 2px;">Art Unit 1771</td> <td style="padding: 2px;">Examiner Andrew T. Piziali</td> </tr> </table>		Application Number 10/728,358	Filed 12/03/2003	For Size-Covered Composite Yarns and Method for Making Same		Art Unit 1771	Examiner Andrew T. Piziali
Application Number 10/728,358	Filed 12/03/2003							
For Size-Covered Composite Yarns and Method for Making Same								
Art Unit 1771	Examiner Andrew T. Piziali							
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ <u>500.00</u> <div style="margin-top: 10px;"> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____ <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>50-3223</u>. I have enclosed a duplicate copy of this sheet. <input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. </div> <p style="margin-top: 10px;">WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>								
I am the <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>45,690</u> <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____ </div> <div style="width: 45%; text-align: center;"> _____ Christina W. Geerlef Typed or printed name _____ 302 683 3314 Telephone number _____ 11/28/06 Date </div> </div>								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
<input checked="" type="checkbox"/> *Total of <u>1</u> forms are submitted.								

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PAGE 2/4 * RCVD AT 11/28/2006 3:00:52 PM [Eastern Standard Time] * SVR:USPTO-EFXXF-3/18 * DNIS:2738300 * CSID:3026833474 * DURATION (mm:ss):01:50

PTO/SB/17 (07-08)

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Effective on 12/09/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2006☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 500.00**Complete if Known**

Application Number	10/728,358
Filing Date	December 03, 2003
First Named Inventor	Tianyi Liao
Examiner Name	Andrew T. Ptziail
Art Unit	1771
Attorney Docket No.	LP4820USNA

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CENTRAL FAX CENTER**NOV 28 2006****METHOD OF PAYMENT (check all that apply)**
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 50-3223 Deposit Account Name: INVISTA S.a.r.l.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 20 or HP =	x	=	
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HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 3 or HP =	x	=	
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HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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- 100 =	/ 50 =	(round up to a whole number) x	=	
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4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): NOTICE OF APPEAL**Fees Paid (\$)**

500.00

SUBMITTED BY

Signature	<i>Christina W. Geerlorf</i>	Registration No. (Attorney/Agent)	45,690	Telephone	302 683 3314
Name (Print/Type)	CHRISTINA W. GEERLORF			Date	November 28, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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